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12/20/2011

Notice of Rulemaking Hearing

Hearings will be conducted in the manner prescribed by the Uniform Administrative Procedures Act, Tennessee Code Annotated, Section 4-5-204. For questions and copies of the notice, contact the person listed below.

Agency/Board/Commission:	Board of Occupational Therapy	
Division:		
Contact Person:	Jennifer Putnam, Assistant General Counsel	
Address:	Office of General Counsel, 220 Athens Way, Suite 210 Nashville, Tennessee 37243	
Phone:	(615) 741-1611	
Email:	Jennifer. Putnam@tn.gov	

Any Individuals with disabilities who wish to participate in these proceedings (to review these filings) and may require aid to facilitate such participation should contact the following at least 10 days prior to the hearing:

ADA Contact:	ADA Coordinator at the Division of Health Related Boards	
Address:	227 French Landing, Heritage Place, Nashville, Tennessee 37243	
Phone:	(615) 532-3202 or (Toll Free) 1-800-778-4123	
Email:		

Hearing Location(s) (for additional locations, copy and paste table)

Address 1:	Poplar Conference Room		
Address 2:	227 French Landing, Heritage Place, Nashville, Tennessee 37243		
City:	Nashville, Tennessee		
Zip:	37243		
Hearing Date:	03/08/2012		
Hearing Time:	9:00 a.mX_CSTEST		

Additional Hearing Information:

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Revision Type (check all that apply): X Amendment		
New Repeal		

Rule(s) (ALL chapters and rules contained in filing must be listed. If needed, copy and paste additional tables to accommodate more than one chapter. Please enter only ONE Rule Number/Rule Title per row.)

Chapter Number	Chapter Title
1150-02	Rules Governing The Practice Of Occupational Therapy
Rule Number	Rule Title
1150-0204	Qualifications For Licensure
1150-0205	Procedures For Licensure

1150-0210	Supervision
1150-0212	Continued Competence

SS-7037 (October 2009) PDA 1693

Rule 1150-02-.04 Qualifications for Licensure is amended by adding a new paragraph (3) and renumbering the remaining paragraphs accordingly so that as amended the new paragraph shall read:

- (3) If the date of application for licensure as an occupational therapist or occupational therapist assistant is more than three (3) years following successful completion of the National Board for Certification in Occupational Therapy Examination, the applicant may be subject to additional requirements for licensure to be determined by the Board including, but not limited to the following:
 - (a) Engage in a formalized process of self-assessment through the use of the AOTA professional development tool;
 - (b) Submit documentation that applicant has attended and successfully completed a minimum of ten (10) hours of formal learning related to the occupational therapy service delivery for each year between the original qualification for licensure and actual application for licensure, at least twenty (20) of which must have occurred within the twenty-four (24) months prior to application and shall relate to the area of practice in which the applicant intends to practice; or
 - (c) Must have a minimum of two (2) hours of continuing education in the area of ethics; one (1) hour of continuing education in Tennessee jurisprudence and a minimum of two (2) hours of continuing education in the area of documentation;
 - (d) Upon licensure approval by the Board as either an occupational therapist or occupational therapist assistant, licensee is required to be supervised during their first twelve (12) months of practice by a licensed occupational therapist in good standing. If the relationship between supervisor and licensee should cease before the expiration of the twelve (12) months, licensee must notify the board and obtain a new supervisor for the remaining time period within thirty (30) days.

Authority: T.C.A. § 63-13-216.

Rule 1150-02-.04 Qualifications for Licensure is amended by deleting part (3) (a) 2 in its entirety and substituting instead the following language so that as amended the new part (3) (a) 2 shall read:

2. Submit documentation of current certification from the Hand Therapy Certification Commission; or

Authority: T.C.A. § 63-13-216.

Rule 1150-02-.04 Qualifications for Licensure is amended by adding a new part (3) (a) 4 so that as amended the new part (3) (a) 4 shall read:

4. If applicant is seeking certification in the use of physical agent modalities, as provided in paragraph (4) of this rule, the applicant shall present to the Board's administrative office proof of successful completion of clinical training that has been completed within the two (2) years preceding the submission of the application for certification.

Authority: T.C.A. § 63-13-216.

Rule 1150-02-.04 Qualifications for Licensure is amended by deleting part (3) (b) 2 in its entirety and substituting instead the following language so that as amended the new part (3) (b) 2 shall read:

2. Submit documentation of current certification from the Hand Therapy Certification Commission; or

Rule 1150-02-.04 Qualifications for Licensure is amended by adding a new part (3) (b) 4 so that as amended the new part (3) (b) 4 shall read:

4. If an applicant is seeking certification in the use of physical agent modalities, as provided in paragraph (4) of this rule, the applicant shall present to the Board's administrative office proof of successful completion of clinical training that has been completed within two (2) years preceding the submission of the application for certification.

Authority: T.C.A. § 63-13-216.

Rule 1150-02-.05 Procedures for Licensure is amended by deleting subparagraph (1) (i) in its entirety and substituting instead the following language so that as amended the new subparagraph (1) (i) shall read:

(i) Physical agent modality certification. If an applicant is seeking certification in the use of physical agent modalities, as provided in paragraph (4) of Rule 1150-02-.04, the applicant shall present to the Board's administrative office proof of successful completion of clinical work that has been completed within the two (2) years prior to submission of the application for certification.

Authority: T.C.A. § 63-13-216.

Rule 1150-02-.05 Procedures for Licensure is amended by deleting subparagraph (2) (i) in its entirety and substituting instead the following language so that as amended the new subparagraph (2) (i) shall read:

(i) Physical agent modality certification. If an applicant is seeking certification in the use of physical agent modalities, as provided in paragraph (4) of Rule 1150-02-.04, the applicant shall present to the Board's administrative office proof of successful completion of clinical work that has been completed within the two (2) years prior to submission of the application for certification

Authority: T.C.A. § 63-13-216.

Rule 1150-02-.10 Supervision is amended by adding a new paragraph (4) and renumbering the remaining paragraphs accordingly so that as amended the new paragraph (4) shall read:

- (4) Supervision of occupational therapy students.
 - (a) Supervision of occupational therapy services provided by occupational therapy doctoraldegree level students is as follows:
 - Either a licensed occupational therapist or a licensed occupational therapy assistant may provide the clinical supervision of occupational therapy doctoraldegree level students in Level I fieldwork placements, pursuant to the Accreditation Council for Occupational Therapy Education (ACOTE).
 - A licensed occupational therapist is required for the clinical supervision of occupational therapy doctoral-degree level students in Level II fieldwork placements, pursuant to the Accreditation Council for Occupational Therapy Education (ACOTE).
 - (b) Supervision of occupational therapy services provided by occupational therapy mastersdegree level students is as follows:
 - Either a licensed occupational therapist or a licensed occupational therapy assistant may provide the clinical supervision of occupational therapy masters-

- degree level students in Level I fieldwork placements, pursuant to the Accreditation Council for Occupational Therapy Education (ACOTE).
- 2. Either a licensed occupational therapist or a licensed occupational therapy assistant may provide the clinical supervision of occupational therapy masters-degree level students in Level II fieldwork placements, pursuant to the Accreditation Council for Occupational Therapy Education (ACOTE).
- (c) Supervision of occupational therapy services provided by occupational therapy assistant students is as follows:
 - 1. Either a licensed occupational therapist or a licensed occupational therapy assistant may provide the clinical supervision of occupational therapy assistant students in Level I fieldwork placements, pursuant to the Accreditation Council for Occupational Therapy Education (ACOTE).
 - 2. Either a licensed occupational therapist or a licensed occupational therapy assistant may provide the clinical supervision of occupational therapy assistant students in Level II fieldwork placements, pursuant to the Accreditation Council for Occupational Therapy Education (ACOTE).

Authority: T.C.A. § 63-13-206 and 63-13-216.

Rule 1150-02-.12 Continued Competence is amended by deleting subparagraph (11) (s) in its entirety and substituting instead the following language so that as amended the new subparagraph (11) (s) shall read:

Level I fieldwork direct supervision OT or OTA (Not one's primary employment role.)	1 Credit per Student Supervised	12 Credits (A licensee may not receive more than 12 Credits for fieldwork supervision total.)	Documentation required, name of student(s), letter of verification from school, dates of fieldwork. Co- supervision is acceptable; maintain dates & times when acting as primary student supervisor. Apply appropriate credits based on time spent supervising.
2. Level II fieldwork direct supervision OT or OTA (Not one's primary employment role.)	1 Credit per each week of supervision, per student supervised	12 Credits (A licensee may not receive more than 12 Credits for fieldwork supervision total.)	Documentation required, name of student(s), letter of verification from school, dated of fieldwork. Co- supervision is acceptable; maintain dates & times when acting as primary student supervisor. Apply appropriate credits based on time spent supervising.

Authority: T.C.A. § 63-13-216

I certify that the information included in this filling is an accurate and complete representation of the intent and scope of rulemaking proposed by the agency.

Date:

Signature:

Name of Officer:

Title of Officer:

Jennifer Putnam

Assistant General Counsel

Department of Health

Subscribed and sworm to perpre me on:

Notary Public Signature:

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Try Public Signature: STATE

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Filed with the Department of State on: My commission expire

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